Response by the Wellcome Trust – February 2019

Summary

- We commend the IACG on producing a comprehensive and ambitious set of proposals, reflecting an impressive process of engagement across sectors and continents over many months. Wellcome is glad to have been able to support this process since the establishment of the IACG in 2017.
- We encourage the IACG to now place an emphasis on engaging with the global community – particularly Member States – to build the case for the adoption and implementation of key recommendations.
- We look forward to further discussions over the coming months as the IACG process concludes.

Recommendations

A - Accelerate Progress in Countries

Member State action is critical to tackling AMR. Wellcome supports calls for Member States to develop and implement National Action Plans (NAPs) which embody a true ‘one health’ approach, and we endorse the emphasis placed by the IACG on ensuring access to safe, quality assured antimicrobials as being central to these plans. We similarly support the call to phase out the use of antimicrobials for growth promotion in animals, although recognise that the technical challenges associated with the refinement and implementation of this recommendation will require further discussion.

Wellcome believes that low- and middle-income countries face particularly acute challenges in the development and implementation of NAPs, which should be clearly highlighted by the IACG. **The IACG should consider how its recommendations could lead to a step change in supporting countries to develop and implement NAPs.** Linking recommendations A1 and A2 with recommendations D2 and E3 is essential if we are to see significant increase in the implementation of high quality NAPs. Development of a plan is a first step, but without strong political and financial support from Member States and across the UN System, then many of these plans will remain on paper rather than achieving full implementation.

As one approach to achieving this, **Member States should be encouraged, in the considerations for recommendation A2, to develop forums for sharing their experience of developing and implementing One Health NAPs, through regional networks/bodies.** Such networks could avoid the duplication of efforts and strengthen capacity.

We welcome the IACG’s focus on the challenges in ensuring effective, affordable access to quality-assured antibiotics. It should be recognised that gaps in the availability of antibiotics can affect countries at all income levels, and that mechanisms to address such issues should include both country- and regional-level interventions, and engage civil society, philanthropic organisations, and the private sector. Efforts to improve access to antibiotics should be considered as essential elements of steps to support innovation in new products described in Section B of the recommendations.

B - Innovate to Secure the Future

We commend the emphasis placed by the IACG on the need to support innovative new products to tackle drug-resistant infections, particularly antibiotics. We endorse the Group’s call for efforts to sustain private sector engagement and investment in this space, and the imperative to develop financial and non-financial incentives to support new product development and address market barriers to ensure new products reach the people and animals that need them.

However, we feel these recommendations could be strengthened by the IACG issuing a call to Member States to act with greater urgency in addressing the challenges of innovation in this space: failure to progress the development of new incentive models for the development of new products (antibiotics in particular) over the short term could lead to an irretrievable loss of innovation capacity and expertise. Reflecting current initiatives in the UK and Sweden, the IACG should call upon Member States to explore pilots of new reimbursement models to stimulate the development of antimicrobials, vaccines and diagnostics whilst supporting improved stewardship and access.

Wellcome fully supports calls for developing platforms to enable transparency and open access to data, having invested in initiatives to achieve such aims. **Examples which could be sited by the IACG as platforms to be built on in recommendation B3 are:**
- **SEDRIC**, an international think-thank of experts working together to accelerate filling the critical evidence gaps and improving translation of the evidence base into effective policy and practice interventions.
- **The AMR Research Initiative**, a project gathering and openly publishing data generated by industry sponsored surveillance programmes.
- **The Shared Platform for Antibiotic Research and Knowledge (SPARK)**, a publicly available, interactive tool providing data to help scientists around the world identify urgently needed new antibiotics.
- **ClinicalStudyDataRequest.com (CSDR)**, a data sharing initiative involving academic research funders and pharmaceutical companies to list and share clinical trial datasets.

**C - Collaborate for More Effective Action**

As part of a strong global response to AMR, it is essential that mechanisms are found to engage all relevant stakeholders, and as such the implementation of recommendations C1 and C2 are essential. We endorse the recognition of the role that can be played by the private sector, subject to concerns about conflicts of interest being appropriately addressed.

Many civil society groups have a role in extending access and promoting effective stewardship, particularly Civil Society Organisations (CSOs) working within a country to deliver healthcare. These organisations may have unique insights in to what works in specific country contexts. Therefore, **recommendation C1 could be strengthened by highlighting the role of civil society in extending access while also promoting effective stewardship.**

**D - Invest for a Sustainable Response**

Wellcome fully supports steps taken with these recommendations to increase the engagement of financing and development institutions in efforts to address AMR. There are examples where financing and development stakeholders have had a positive impact on the approach taken to AMR, and the development of such initiatives should be supported and promoted.

**E - Strengthen Accountability and Global Governance**

Wellcome fully supports the recommendations to strengthen global governance, with the model of a small One Health Global Leadership group, supported by the establishment of a partnership platform which will provide a mechanism for multi-stakeholder engagement.

Similarly, we support the principle (set out in E2) of the role which might be played by a new Independent Panel to provide authoritative evidence to guide decision-making by Member States and international organisations, and to guide both the emergence of drug resistance and progress in the global response. However, we suggest that **the IACG should consider providing greater clarity on the possible operating model for both the Global Leadership group and Independent Panel, and in particular how they might interact with Member States.**

Wellcome considers implementation of this recommendation to be fundamental to the delivery of the other recommendations within the report. There have been steps (with limited success) to undertake, develop and/or implement variations of the recommendations contained within sections A to D previously. The ideas contained within recommendations E1 and E2 have yet to be tried but have the potential to provide the framework and accountability needed to ensure progress and implementation of this whole report.

The examples given in the recommendations points to the practicality and effectiveness of such structures. As recognised in the recommendations, AMR is a complex, multisectoral issue with a diverse range of stakeholders. It is difficult to see how the coordination needed to address this very serious threat can be achieved without a formal coordination group who has the authority to hold the different sectors/stakeholders to account.

**Wellcome Trust would therefore suggest giving greater prominence to these recommendations within the report and request that the IACG calls on the UN Secretary General to prioritise implementation of the recommendations within this section.** We would encourage the IACG to focus upon engaging member states closely in the discussion of the implementation of this section of the recommendations.

*Wellcome is the UK’s largest charitable foundation. Over the next five years, we plan to invest up to £5 billion in biomedical research and the medical humanities in the UK and internationally. We also support the development of new commercial innovations to improve health.*